



PTO/SB/53 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE**REISSUE APPLICATION: CONSENT OF ASSIGNEE;  
STATEMENT OF NON-ASSIGNMENT**

Docket Number (Optional)

0200107R

This is part of the application for a reissue patent based on the original patent identified below.

**Name of Patentee(s)**

Bjarnason, et al.

**Patent Number**

5,914,982

**Date Patent Issued**

June 22, 1999

**Title of Invention**

Method and Apparatus for Training Linear Equalizers in a PCM Modem

1.  Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)
2.  Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.

One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".

The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.

The assignee(s) owning an undivided interest in said original patent is/are PCTEL, Inc., and the assignee(s) consents to the accompanying application for reissue.

**Name of assignee/inventor (if not assigned)**

PCTEL, Inc.

**Signature****Date****Typed or printed name and title of person signing for assignee (if assigned)**

Varda Goldman, Vice President/General Counsel

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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**REISSUE APPLICATION DECLARATION BY THE ASSIGNEE**Docket Number (optional)  
0200107R

I hereby declare that:

My residence and mailing address and citizenship are stated below next to my name.

I am authorized to act on behalf of the following assignee: PCTEL, Inc.and the title of my position with said assignee is: Vice President / General Counsel

The entire title to the patent identified below is vested in said assignee.

Name of Patentee(s): Bjarnason, et al.

Patent Number <u>5,914,982</u>	Date of Patent Issued <u>June 22, 1999</u>
Title of Invention <u>Method and Apparatus for Training Linear Equalizers in a PCM Modem</u>	

I believe said patentee(s) to be the original, first and sole/joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled \_\_\_\_\_  
Method and Apparatus for Training Linear Equalizers in a PCM Modem \_\_\_\_\_,

the specification of which

 is attached hereto. was filed on May 4, 2001 as reissue application number 09 / 849,501  
and was amended on December 12, 2002  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

 by reason of a defective specification or drawing. by reason of the patentee claiming more or less than he had the right to claim in the patent. by reason of other errors.

At least one error upon which reissue is based is described as follows:

**The original patent to be partly invalid or inoperative by reason of the patentee claiming less than the patentee had a right to claim in the patent.**

[Attach additional sheets, if needed.]

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/52 (02-01)

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Approved for use through 07/31/2004. GPO 0-851-0000  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (Optional) 0200107R																																				
<p>I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Name(s)</td> <td style="width: 70%;">Registration Number</td> </tr> <tr> <td>Farshad Farjami</td> <td>41,014</td> </tr> <tr> <td>Michael Farjami</td> <td>38,135</td> </tr> <tr> <td colspan="2"> </td> </tr> <tr> <td colspan="2"> </td> </tr> </table>			Name(s)	Registration Number	Farshad Farjami	41,014	Michael Farjami	38,135																														
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Farshad Farjami	41,014																																					
Michael Farjami	38,135																																					
<p>Correspondence Address: Direct all communications about the application to:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; vertical-align: top;"> <input checked="" type="checkbox"/> Customer Number         </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">25700</div> </td> <td style="width: 30%; text-align: right; vertical-align: middle;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">Place Customer Number Bar Code Label Here</div> </td> </tr> <tr> <td colspan="3" style="text-align: center; font-style: italic;">Type Customer Number Here</td> </tr> </table>			<input checked="" type="checkbox"/> Customer Number	<div style="border: 1px solid black; padding: 2px; display: inline-block;">25700</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">Place Customer Number Bar Code Label Here</div>	Type Customer Number Here																																
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<p><i>OR</i></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top;"> <input checked="" type="checkbox"/> Firm or Individual Name         </td> <td colspan="5" style="width: 85%;">           Farshad Farjami            Farjami &amp; Farjami LLP         </td> </tr> <tr> <td>Address</td> <td colspan="5">26522 La Alameda Ave., Suite 360</td> </tr> <tr> <td>Address</td> <td colspan="5"></td> </tr> <tr> <td>City</td> <td style="width: 30%;">Mission Viejo</td> <td style="width: 15%;">State</td> <td style="width: 15%;">CA</td> <td style="width: 15%;">Zip</td> <td style="width: 15%;">92691</td> </tr> <tr> <td>Country</td> <td colspan="5">U.S.</td> </tr> <tr> <td>Telephone</td> <td>949-282-1000</td> <td>Fax</td> <td colspan="3">949-282-1002</td> </tr> </table>			<input checked="" type="checkbox"/> Firm or Individual Name	Farshad Farjami Farjami & Farjami LLP					Address	26522 La Alameda Ave., Suite 360					Address						City	Mission Viejo	State	CA	Zip	92691	Country	U.S.					Telephone	949-282-1000	Fax	949-282-1002		
<input checked="" type="checkbox"/> Firm or Individual Name	Farshad Farjami Farjami & Farjami LLP																																					
Address	26522 La Alameda Ave., Suite 360																																					
Address																																						
City	Mission Viejo	State	CA	Zip	92691																																	
Country	U.S.																																					
Telephone	949-282-1000	Fax	949-282-1002																																			
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>																																						
<p>Full name of person signing (given name, family name)</p> <p>Varda Goldman</p>																																						
<p>Signature</p>		<p>Date</p> <p>August 23, 2004</p>																																				
<p>Address of Assignee 8725 West Higgins Road, Suite 400, Chicago, IL 60631</p>																																						
<p><b>Patentee</b> Elias Bjarnason</p>		<p>Citizenship Iceland</p>																																				
<p>Residence/Mailing Address Baughus 19, 112 Reykjavik, Iceland</p>																																						
<p><b>Patentee</b> Olafur Jonsson</p>		<p>Citizenship Iceland</p>																																				
<p>Residence/Mailing Address Fannafold 170A, 112 Reykjavik, Iceland</p>																																						
<p><input checked="" type="checkbox"/> Additional Patentees are named on separately numbered sheets attached hereto.</p>																																						



Attachment to Reissue Application Declaration by the Assignee  
(Additional Patentee Name)

Patentee: Sverrir Olafsson

Citizenship: Iceland

Residence/Mailing Address: Thingholtsstraeti 14, 101 Reykjavik, Iceland



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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Bjarnason, et al.Application No./Patent No.: 08/874,316 / 5,914,982 Filed/Issued: June 13, 1997 / June 22, 1999Entitled: Method and Apparatus for Training Linear Equalizers in a PCM ModemPCTEL, Inc., a corporation

(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or
2.  an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel/Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

B.  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Bjarnason, Jonsson and Olafsson To: Rockwell Semiconductor Systems, Inc.  
The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: Rockwell Semiconductor Systems, Inc. To: Conexant Systems, Inc.  
The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: Conexant Systems, Inc. To: PCTEL, Inc.  
The document was recorded in the Patent and Trademark Office at  
Reel 014734, Frame 0539, or for which a copy thereof is attached.

 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

NOTE: A separate copy (*i.e.*, the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

August 23, 2004  
DateVarda Goldman  
SignatureVarda Goldman  
Typed or printed nameVice President/General Counsel  
Title